PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with ...plicable fee(s), to: Mail Stop ISSUE hr.E.

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

INCOMPLETIONS OF				or <u>Fax</u> ((571)-273-2885				
maintenance fee notification	ons.	mirt 14 (9)	m Block 1, by	(a) specifying a new cor	ATION FEE (if req of maintenance fees rrespondence addres	uired). will be s; and/o	Blocks I through 5 s mailed to the current r (b) indicating a sens	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDEN	ICE ADDRESS (Note: Use I	Nock I fo	rany change of address	ì	lote: A certificate o	f mailin	g can only be used fo	r domestic mailings of the	
42754 7590 03/09/2010					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
Nields, Lemack & Frame, LLC 176 E. Main Street Suite #5 Westborough, MA 01581					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
9 7				<u></u>				(Depositor's name)	
				<u> </u>				(Signature)	
APPLICATION NO.	FILING DATE							(Date)	
10/593,884 09/21/2006				FIRST NAMED INVENTO Daisaku Matsunaga	PR.	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.	
TITLE OF INVENTION: MICROPATTERN RETARDATION ELEMENT					sunaga 576P092 5473				
				•					
APPLN, TYPE	SMALL ENTITY	iss	UE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E PEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1510	\$300	\$0	······	\$1810	06/09/2010	
EXAMINER		,	ART UNIT	CLASS-SUBCLASS	1				
HON, SOW FUN 1794				428-001300					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 				(1) the names of up a or agents OR, alternat (2) the name of a sing registered attorney or 2 registered patent attolisted, no name will be	ing on the patent front page, list the sof up to 3 registered patent attorneys R, alternatively, the of a single firm (having as a member a attorney or agent) and the names of up to patent attorneys or agents. If no name is attorney or principles of the patent attorneys or agents. If no name is attorney or agents.				
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNE 1. National Institu 2. Nippon Kayaku Ka Please check the appropriate a	an assignee is identif 37 CFR 3.11. Compl E te Of Advanced	ied bek etion of Indus:	ow, no assignee d this form is NOT trial Science	lata will appear on the p a substitute for filing an (B) RESIDENCE: (CITY and Technology	satent. If an assigne assignment. / and STATE OR CO	OUNTR'	Y) Tolonov		
4a. The following fee(s) are so XI issue Fee XI Publication Fee (No sm XI Advance Order - # of (ubmitted: nail entity discount per	4b. (. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-000 (enclose an extra copy of this form).						
5. Change in Entity Status (f	ALL ENTITY status.	See 37	CFR 1.27 [The Applicant is no law.					
NOTE: The Issue Fee and Pub interest as shown by the record	dication Fee (if requires of the United States	ed) will	not be accepted f	b. Applicant is no long from anyone other than the	ger claiming SMAL.1 ne applicant; a regist	ered atto	Y status, See 37 CFR	1.27(g)(2).	
Authorized Signature								ssignce or other party in	
Typed or printed name Kevin S. Lemack			k	Panistration No. 22 F70					
This collection of information an application. Confidentiality submitting the completed applichis form and/or suggestions for 1450, Alexandria, Virgini Alexandria, Virgini Alexandria, Virgini Paperwork Reduction	is required by 37 CPF is governed by 35 U ication form to the U or reducing this burde a 22313-1450. DO N 50.	S.C. 12 SPTO. n, shou OT SE	The information 2 and 37 CFR 1.1 Time will vary del to the CND FEES OR CO	is required to obtain or re 4. This collection is esti- pending upon the indivi- hief Information Officer MPLETED FORMS TO	tain a benefit by the mated to take 12 min dual case. Any come , U.S. Patent and Tr THIS ADDRESS.	public y nutes to ments or ademark SEND To	which is to file (and by complete, including go the amount of time y Office, U.S. Departm O: Commissioner for f	the USPTO to process) athering, preparing, and require to complete lent of Commerce, P.O. Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.